

B1 (Official Form 1)(04/13)

**United States Bankruptcy Court**  
**Western District of Virginia**

**Voluntary Petition**

Name of Debtor (if individual, enter Last, First, Middle): <b>Stead, William L.</b>	Name of Joint Debtor (Spouse) (Last, First, Middle): <b>Stead, Cathy M.</b>
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): <b>FKA Cathy Cook</b>
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all) <b>xxx-xx-1565</b>	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) <b>xxx-xx-4511</b>
Street Address of Debtor (No. and Street, City, and State): <b>513 Jefferson Drive</b> <b>Palmyra, VA</b>	Street Address of Joint Debtor (No. and Street, City, and State): <b>513 Jefferson Drive</b> <b>Palmyra, VA</b>
ZIP Code <b>22963</b>	ZIP Code <b>22963</b>
County of Residence or of the Principal Place of Business: <b>Fluvanna</b>	County of Residence or of the Principal Place of Business: <b>Fluvanna</b>
Mailing Address of Debtor (if different from street address):	Mailing Address of Joint Debtor (if different from street address):
ZIP Code	ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):	

<b>Type of Debtor</b> (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	<b>Nature of Business</b> (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input checked="" type="checkbox"/> Chapter 13  <b>Nature of Debts</b> (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
<b>Chapter 15 Debtors</b> Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:		<input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
<b>Filing Fee</b> (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 ( <i>amount subject to adjustment on 4/01/16 and every three years thereafter</i> ). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).

<b>Statistical/Administrative Information</b> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors.</li> <li><input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.</li> </ul>	THIS SPACE IS FOR COURT USE ONLY																				
Estimated Number of Creditors <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"><input type="checkbox"/></td> <td style="width: 12.5%;"><input checked="" type="checkbox"/></td> <td style="width: 12.5%;"><input type="checkbox"/></td> </tr> <tr> <td>1-49</td> <td>50-99</td> <td>100-199</td> <td>200-999</td> <td>1,000-5,000</td> <td>5,001-10,000</td> <td>10,001-25,000</td> <td>25,001-50,000</td> <td>50,001-100,000</td> <td>OVER 100,000</td> </tr> </table>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	OVER 100,000
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
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Estimated Assets <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"><input type="checkbox"/></td> <td style="width: 12.5%;"><input type="checkbox"/></td> <td style="width: 12.5%;"><input checked="" type="checkbox"/></td> <td style="width: 12.5%;"><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
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Estimated Liabilities <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"><input type="checkbox"/></td> <td style="width: 12.5%;"><input type="checkbox"/></td> <td style="width: 12.5%;"><input checked="" type="checkbox"/></td> <td style="width: 12.5%;"><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
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## B1 (Official Form 1)(04/13)

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>Stead, William L.</b> <b>Stead, Cathy M.</b>
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet)		
Location Where Filed: <b>Western District of Virginia (wife Ch 7)</b>	Case Number: <b>99-02768</b>	Date Filed: <b>9/13/99</b>
Location Where Filed:	Case Number:	Date Filed:
<b>Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor</b> (If more than one, attach additional sheet)		
Name of Debtor: <b>- None -</b>	Case Number:	Date Filed:
District:	Relationship:	Judge:
<b>Exhibit A</b>		<b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>X /s/ Jonathan S. Woodruff VSB</b> <b>May 9, 2014</b> Signature of Attorney for Debtor(s) (Date) <b>Jonathan S. Woodruff VSB #66082</b>
<b>Exhibit C</b>		
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?		
<input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.		
<b>Exhibit D</b>		
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)		
<input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.		
If this is a joint petition:		
<input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.		
<b>Information Regarding the Debtor - Venue</b>		
(Check any applicable box)		
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.		
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b>		
(Check all applicable boxes)		
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)		
<hr/> (Name of landlord that obtained judgment)		
<hr/> (Address of landlord)		
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).		

B1 (Official Form 1)(04/13)

**Voluntary Petition**

(This page must be completed and filed in every case)

Name of Debtor(s):

**Stead, William L.****Stead, Cathy M.****Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.  
 [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.  
 [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X /s/ William L. Stead**Signature of Debtor **William L. Stead****X /s/ Cathy M. Stead**Signature of Joint Debtor **Cathy M. Stead**

Telephone Number (If not represented by attorney)

**May 9, 2014**

Date

**Signature of Attorney\*****X /s/ Jonathan S. Woodruff VSB**

Signature of Attorney for Debtor(s)

**Jonathan S. Woodruff VSB #66082**

Printed Name of Attorney for Debtor(s)

**Boyle, Bain, Reback & Slayton**

Firm Name

**420 Park Street  
Charlottesville, VA 22902**

Address

**marshall.slayton@bbrs.net; jonathan.woodruff@bbrs.net  
(434) 979-7900 Fax: (434) 977-3298**

Telephone Number

**May 9, 2014**

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

**Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X**

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X**

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

**Signature of Non-Attorney Bankruptcy Petition Preparer**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

**X**

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person,or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.*

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court  
Western District of Virginia**

In re **William L. Stead  
Cathy M. Stead**

Debtor(s)

Case No.

Chapter

**13**

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* \_\_\_\_\_

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: /s/ William L. Stead  
William L. Stead

Date: May 9, 2014

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court  
Western District of Virginia**

In re **William L. Stead  
Cathy M. Stead**

Debtor(s)

Case No.  
Chapter

**13**

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* \_\_\_\_\_

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: /s/ Cathy M. Stead  
Cathy M. Stead

Date: May 9, 2014

B 6 Summary (Official Form 6 - Summary) (12/13)

**United States Bankruptcy Court**  
**Western District of Virginia**

In re **William L. Stead,**  
**Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

Chapter \_\_\_\_\_

**13**

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	<b>Yes</b>	<b>1</b>	<b>146,500.00</b>		
B - Personal Property	<b>Yes</b>	<b>4</b>	<b>142,594.00</b>		
C - Property Claimed as Exempt	<b>Yes</b>	<b>2</b>			
D - Creditors Holding Secured Claims	<b>Yes</b>	<b>6</b>		<b>297,416.00</b>	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	<b>Yes</b>	<b>2</b>		<b>1,224.00</b>	
F - Creditors Holding Unsecured Nonpriority Claims	<b>Yes</b>	<b>22</b>		<b>47,600.00</b>	
G - Executory Contracts and Unexpired Leases	<b>Yes</b>	<b>1</b>			
H - Codebtors	<b>Yes</b>	<b>1</b>			
I - Current Income of Individual Debtor(s)	<b>Yes</b>	<b>3</b>			<b>6,528.00</b>
J - Current Expenditures of Individual Debtor(s)	<b>Yes</b>	<b>2</b>			<b>4,522.00</b>
Total Number of Sheets of ALL Schedules		<b>44</b>			
		Total Assets	<b>289,094.00</b>		
			Total Liabilities	<b>346,240.00</b>	

B 6 Summary (Official Form 6 - Summary) (12/13)

**United States Bankruptcy Court**  
**Western District of Virginia**

In re **William L. Stead,**  
**Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

Chapter \_\_\_\_\_

**13**

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

- Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	<b>0.00</b>
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	<b>1,224.00</b>
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	<b>0.00</b>
Student Loan Obligations (from Schedule F)	<b>0.00</b>
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	<b>0.00</b>
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	<b>0.00</b>
TOTAL	<b>1,224.00</b>

**State the following:**

Average Income (from Schedule I, Line 12)	<b>6,528.00</b>
Average Expenses (from Schedule J, Line 22)	<b>4,522.00</b>
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20 )	<b>8,368.00</b>

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		<b>80,338.00</b>
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	<b>1,224.00</b>	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		<b>0.00</b>
4. Total from Schedule F		<b>47,600.00</b>
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		<b>127,938.00</b>

Case No. \_\_\_\_\_

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Debtors

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

**0** continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand		<b>Cash on hand</b>	H	<b>1.00</b>
		<b>Cash on hand</b>	W	<b>1.00</b>
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<b>Checking/savings account at SunTrust</b>	J	<b>10.00</b>
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		<b>Large appliances, @ debtor(s) residence</b>	J	<b>1,750.00</b>
		<b>Washer, dryer &amp; computer, @ debtor(s) residence</b>	J	<b>1,535.00</b>
		<b>Small appliances, @ debtor(s) residence</b>	J	<b>270.00</b>
		<b>Electronics, @ debtor(s) residence</b>	J	<b>850.00</b>
		<b>Kitchen furniture, @ debtor(s) residence</b>	J	<b>600.00</b>
		<b>Living room furniture, @ debtor(s) residence</b>	J	<b>800.00</b>
		<b>Bedroom furniture, @ debtor(s) residence</b>	J	<b>2,000.00</b>
		<b>Home office furniture, @ debtor(s) residence</b>	J	<b>920.00</b>
		<b>Lawn &amp; garden goods &amp; furniture, @ debtor(s) residence</b>	J	<b>2,000.00</b>
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		<b>Video tapes, @ debtor(s) residence</b>	J	<b>300.00</b>
				<b>Sub-Total &gt;</b>
				<b>(Total of this page)</b>
				<b>11,037.00</b>

3 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
6. Wearing apparel.		<b>Clothing, @ debtor(s) residence</b>	<b>H</b>	<b>1,000.00</b>
		<b>Clothing, @ debtor(s) residence</b>	<b>W</b>	<b>1,000.00</b>
7. Furs and jewelry.		<b>Wedding ring, worn by debtor wife</b>	<b>W</b>	<b>3,000.00</b>
		<b>Jewelry, @ debtor(s) residence</b>	<b>J</b>	<b>1,645.00</b>
8. Firearms and sports, photographic, and other hobby equipment.		<b>Exercise equipment &amp; treadmill, @ debtor(s) residence</b>	<b>J</b>	<b>525.00</b>
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		<b>Term life &amp; STD policies through employer</b>	<b>W</b>	<b>1.00</b>
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		<b>Retirement savings plan through VALIC</b>	<b>H</b>	<b>19,143.00</b>
13. Stock and interests in incorporated and unincorporated businesses. Itemize.		<b>Interest in GE Management Company stock (debtor unsure of value, pays \$6 per month)</b>	<b>W</b>	<b>1.00</b>
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
				Sub-Total > (Total of this page)
				<b>26,315.00</b>

Sheet 1 of 3 continuation sheets attached  
to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.		<b>2014 federal/state income tax refunds</b>	J	<b>1.00</b>
		<b>Earned but unpaid wages from employer(s)</b>	H	<b>1.00</b>
		<b>Earned but unpaid wages from employer(s)</b>	W	<b>1.00</b>
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		<b>2011 Honda CR2 w/ 100,000 miles, @ debtor(s) residence (tax-assessed valuation)</b>	W	<b>14,950.00</b>
		<b>2006 Chevrolet Corvette, @ debtor(s) residence (debtor valuation)</b>	J	<b>28,000.00</b>
		<b>2003 Toyota Tacoma w/ 101,000 miles, @ debtor(s) residence (tax-assessed valuation)</b>	H	<b>9,700.00</b>

Sub-Total > **52,653.00**  
(Total of this page)

Sheet 2 of 3 continuation sheets attached  
to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
		<b>2005 Toyota Tacoma w/ 150,000 miles, @ debtor(s) residence (tax-assessed valuation)</b>	<b>W</b>	<b>13,100.00</b>
		<b>2004 Chevrolet Corvette, @ debtor(s) residence (debtor valuation)</b>	<b>J</b>	<b>28,000.00</b>
		<b>2007 Heritage Softail Harley Davidson motorcycle with 14,000 miles in good condition, @ debtor(s) residence (NADA valuation)</b>	<b>J</b>	<b>10,675.00</b>
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.		<b>Printer &amp; Mary Kay inventory, @ debtor(s) residence</b>	<b>J</b>	<b>800.00</b>
30. Inventory.	X			
31. Animals.		<b>9 cats &amp; 5 dogs, @ debtor(s) residence</b>	<b>J</b>	<b>14.00</b>
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
				<b>Sub-Total &gt;</b>
				<b>52,589.00</b>
				(Total of this page)
				<b>Total &gt;</b>
				<b>142,594.00</b>

Sheet 3 of 3 continuation sheets attached  
to the Schedule of Personal Property

(Report also on Summary of Schedules)

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

- 11 U.S.C. §522(b)(2)  
 11 U.S.C. §522(b)(3)

Check if debtor claims a homestead exemption that exceeds  
\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter  
with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<b>Real Property</b>			
Residence at 513 Jefferson Drive, Palmyra, Virginia (tax-assessed valuation)	Va. Code Ann. § 34-4	1.00	146,500.00
<b>Cash on Hand</b>			
Cash on hand	Va. Code Ann. § 34-4	1.00	1.00
Cash on hand	Va. Code Ann. § 34-4	1.00	1.00
<b>Checking, Savings, or Other Financial Accounts, Certificates of Deposit</b>			
Checking/savings account at SunTrust	Va. Code Ann. § 34-4	10.00	10.00
<b>Household Goods and Furnishings</b>			
Large appliances, @ debtor(s) residence	Va. Code Ann. § 34-26(4a)	1,750.00	1,750.00
Washer, dryer & computer, @ debtor(s) residence	Va. Code Ann. § 34-26(4a)	1.00	1,535.00
Small appliances, @ debtor(s) residence	Va. Code Ann. § 34-26(4a)	270.00	270.00
Electronics, @ debtor(s) residence	Va. Code Ann. § 34-26(4a)	850.00	850.00
Kitchen furniture, @ debtor(s) residence	Va. Code Ann. § 34-26(4a)	600.00	600.00
Living room furniture, @ debtor(s) residence	Va. Code Ann. § 34-26(4a)	800.00	800.00
Bedroom furniture, @ debtor(s) residence	Va. Code Ann. § 34-26(4a)	2,000.00	2,000.00
Home office furniture, @ debtor(s) residence	Va. Code Ann. § 34-26(4a)	920.00	920.00
Lawn & garden goods & furniture, @ debtor(s) residence	Va. Code Ann. § 34-26(4a)	2,000.00	2,000.00
<b>Books, Pictures and Other Art Objects; Collectibles</b>			
Video tapes, @ debtor(s) residence	Va. Code Ann. § 34-4	300.00	300.00
<b>Wearing Apparel</b>			
Clothing, @ debtor(s) residence	Va. Code Ann. § 34-26(4)	1,000.00	1,000.00
Clothing, @ debtor(s) residence	Va. Code Ann. § 34-26(4)	1,000.00	1,000.00
<b>Furs and Jewelry</b>			
Wedding ring, worn by debtor wife	Va. Code Ann. § 34-26(1a)	3,000.00	3,000.00
Jewelry, @ debtor(s) residence	Va. Code Ann. § 34-4	1,645.00	1,645.00
<b>Firearms and Sports, Photographic and Other Hobby Equipment</b>			
Exercise equipment & treadmill, @ debtor(s) residence	Va. Code Ann. § 34-4	525.00	525.00

B6C (Official Form 6C) (4/13) -- Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

(Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<b>Interests in Insurance Policies</b>			
Term life & STD policies through employer	Va. Code Ann. § 34-4	1.00	1.00
<b>Interests in IRA, ERISA, Keogh, or Other Pension or Profit Sharing Plans</b>			
Retirement savings plan through VALIC	Va. Code Ann. § 34-34	19,143.00	19,143.00
<b>Stock and Interests in Businesses</b>			
Interest in GE Management Company stock (debtor unsure of value, pays \$6 per month)	Va. Code Ann. § 34-4	1.00	1.00
<b>Other Liquidated Debts Owing Debtor Including Tax Refund</b>			
2014 federa/state income tax refunds	Va. Code Ann. § 34-4	1.00	1.00
<b>Earned but unpaid wages from employer(s)</b>			
Earned but unpaid wages from employer(s)	Va. Code Ann. § 34-4	1.00	1.00
<b>Automobiles, Trucks, Trailers, and Other Vehicles</b>			
2003 Toyota Tacoma w/ 101,000 miles, @ debtor(s) residence (tax-assessed valuation)	Va. Code Ann. § 34-4	1.00	9,700.00
2005 Toyota Tacoma w/ 150,000 miles, @ debtor(s) residence (tax-assessed valuation)	Va. Code Ann. § 34-4	1.00	13,100.00
2004 Chevrolet Corvette, @ debtor(s) residence (debtor valuation)	Va. Code Ann. § 34-26(8) Va. Code Ann. § 34-26(8) Va. Code Ann. § 34-4	6,000.00 6,000.00 7,000.00	28,000.00
<b>Machinery, Fixtures, Equipment and Supplies Used in Business</b>			
Printer & Mary Kay inventory, @ debtor(s) residence	Va. Code Ann. § 34-26(7)	800.00	800.00
<b>Animals</b>			
9 cats & 5 dogs, @ debtor(s) residence	Va. Code Ann. § 34-26(5)	14.00	14.00
Total:		55,638.00	235,469.00

Sheet 1 of 1 continuation sheets attached to the Schedule of Property Claimed as Exempt

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Best Case Bankruptcy

In re **William L. Stead,**  
**Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDELE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR H W J C	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT J	UNLIQUIDATED T	DISPUTED D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.								
Aaron's Rent to Own 309 East Paces Ferry Road NE Atlanta, GA 30305-2377	J		Purchase Money Security  Washer, dryer & computer, @ debtor(s) residence					
			Value \$ 1,535.00				1,535.00	0.00
Account No.								
Aaron's Sales & Lease Ownership 330 Pantops Center Charlottesville, VA 22911			Additional notice address for Aaron's Rent to Own				Notice Only	
			Value \$					
Account No. 1560691041735	H		Opened 5/01/06 Last Active 3/14/14  Second Mortgage  513 Jefferson Drive, Palmyra, Virginia					
Chase Po Box 24696 Columbus, OH 43224			Value \$ 146,500.00				43,073.00	43,073.00
Account No.								
Chase Home Finance LLC 3415 Vision Drive Columbus, OH 43219			Additional notice address for Chase				Notice Only	
			Value \$					
5 continuation sheets attached				Subtotal (Total of this page)			44,608.00	43,073.00

B6D (Official Form 6D) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR  H W J C	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT UNLIQUIDATED DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.						
Chase Home Finance LLC P.O. Box 44090 Jacksonville, FL 32231-4909			Additional notice address for Chase		Notice Only	
			Value \$			
Account No.						
JP Morgan Chase ATTN Bankruptcy P.O. Box 15298 Wilmington, DE 19850-5298			Additional notice address for Chase		Notice Only	
			Value \$			
Account No. 20130520720254			Opened 5/01/13 Last Active 3/20/14			
Harley Davidson Financial Attention: Bankruptcy Po Box 22048 Carson City, NV 89721	J		DMV lien 2007 Heritage Softail Harley Davidson motorcycle			
			Value \$ 10,675.00		15,901.00	5,226.00
Account No.						
Harley Davidson Financial Attention: Bankruptcy Po Box 182125 Columbus, OH 43218			Additional notice address for Harley Davidson Financial		Notice Only	
			Value \$			
Account No.						
Harley-Davidson Credit Corp. P.O. Box 829009 Dallas, TX 75382-9009			Additional notice address for Harley Davidson Financial		Notice Only	
			Value \$			
Sheet 1 of 5 continuation sheets attached to Schedule of Creditors Holding Secured Claims					Subtotal (Total of this page)	15,901.00
						5,226.00

B6D (Official Form 6D) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR H W J C	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTIN GENT	UNLIQ UIDATE D	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.								
Lake Monticello Owners Association 41 Ashlawn Boulevard Palmyra, VA 22963	J		2014  HOA Dues  513 Jefferson Drive, Palmyra, Virginia					
			Value \$ 146,500.00				400.00	400.00
Account No. 9502314904			Opened 8/01/13 Last Active 3/31/14  DMV lien  2005 Toyota Tacoma					
Lendmark Financial Services 1862 Abbey Road Charlottesville, VA 22911	W		Value \$ 13,100.00				11,260.00	0.00
Account No.								
Lendmark Financial Ser 2118 Usher St Nw Covington, GA 30014			Additional notice address for Lendmark Financial Services				Notice Only	
			Value \$					
Account No.								
Lendmark Financial Services c/o CT Corporation System, R/A 4701 Cox Road, Suite 301 Glen Allen, VA 23060-6802			Additional notice address for Lendmark Financial Services				Notice Only	
			Value \$					
Account No. 593044902			Opened 5/08/06 Last Active 2/03/14  First Mortgage  513 Jefferson Drive, Palmyra, Virginia					
Ocwen Loan Servicing P.O. Box 740616 Atlanta, GA 30374	H		Value \$ 146,500.00				164,938.00	18,438.00
Sheet 2 of 5 continuation sheets attached to Schedule of Creditors Holding Secured Claims				Subtotal (Total of this page)			176,598.00	18,838.00

B6D (Official Form 6D) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR  H W J C	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTIN GENT	UNLIQ UIDATE D	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.								
OCWEN Loan Servicing PO Box 24738 West Palm Beach, FL 33416			Additional notice address for Ocwen Loan Servicing				Notice Only	
			Value \$					
Account No.								
OCWEN Loan Servicing LLC 1661 Worthington Road Suite 100 West Palm Beach, FL 33401			Additional notice address for Ocwen Loan Servicing				Notice Only	
			Value \$					
Account No. 23824919401			Opened 7/01/11 Last Active 3/20/14					
Regional Acceptance Co 10051 Midlothian Tpke North Chesterfield, VA 23235			DMV lien 2011 Honda CR2					
			Value \$ 14,950.00				23,927.00	8,977.00
Account No.								
Regional Acceptance Corp P.O. Box 1847 Wilson, NC 27894-1847			Additional notice address for Regional Acceptance Co				Notice Only	
			Value \$					
Account No.								
Regional Acceptance Corp 266 Beacon Drive Winterville, NC 28590			Additional notice address for Regional Acceptance Co				Notice Only	
			Value \$					
Sheet <u>3</u> of <u>5</u> continuation sheets attached to Schedule of Creditors Holding Secured Claims							Subtotal (Total of this page)	23,927.00
								8,977.00

B6D (Official Form 6D) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR H W J C	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTIN GENT	UNLIQ UIDATE D	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.								
Regional Acceptance Corp. P.O. Box 20126 Greenville, NC 27858			Additional notice address for Regional Acceptance Co				Notice Only	
			Value \$					
Account No.								
Regional Acceptance Corporation 5425 Robin Hood Road Suite 101 Norfolk, VA 23513			Additional notice address for Regional Acceptance Co				Notice Only	
			Value \$					
Account No. 30000112711831000			Opened 4/01/12 Last Active 3/19/14					
Santander Consumer Usa Po Box 961245 Ft Worth, TX 76161	J		DMV lien					
			2006 Chevrolet Corvette					
			Value \$	28,000.00			32,224.00	4,224.00
Account No.								
Santander Consumer USA ATTN Bankruptcy Dept. PO Box 560284 Dallas, TX 75356-0284			Additional notice address for Santander Consumer Usa				Notice Only	
			Value \$					
Account No. 11131605011872890			Opened 11/01/13 Last Active 3/31/14					
Springleaf Financial Attn: Bankruptcy Dept Po Box 3251 Evansville, IN 47731	H		DMV lien					
			2003 Toyota Tacoma					
			Value \$	9,700.00			4,158.00	0.00
Sheet 4 of 5 continuation sheets attached to Schedule of Creditors Holding Secured Claims				Subtotal (Total of this page)			36,382.00	4,224.00

B6D (Official Form 6D) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR  H W J C	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT UNLIQUIDATED DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.						
Springleaf P.O. Box 3121 Evansville, IN 47731			Additional notice address for Springleaf Financial		Notice Only	
			Value \$			
Account No.						
Springleaf Financial Services Inc. c/o CT Corporation System 4701 Cox Road, Suite 285 Glen Allen, VA 23060			Additional notice address for Springleaf Financial		Notice Only	
			Value \$			
Account No.						
			Value \$			
Account No.						
			Value \$			
Account No.						
			Value \$			
Sheet <u>5</u> of <u>5</u> continuation sheets attached to Schedule of Creditors Holding Secured Claims				Subtotal (Total of this page)	<b>0.00</b>	<b>0.00</b>
				Total (Report on Summary of Schedules)	<b>297,416.00</b>	<b>80,338.00</b>

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

### TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

#### Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

#### Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

#### Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

#### Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

#### Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

#### Deposits by individuals

Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

#### Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

#### Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

#### Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (4/13) - Cont.

In re **William L. Stead,**  
**Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
(Continuation Sheet)**Taxes and Certain Other Debts  
Owed to Governmental Units****TYPE OF PRIORITY**

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTIN GEN T	UNLI QU IDA TE D	DISP UTE D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	AMOUNT ENTITLED TO PRIORITY
Account No. <b>14606</b>		2013  Personal property taxes				244.00	0.00	244.00
Fluvanna County Treasurer PO Box 299 Palmyra, VA 22963	W							
Account No. <b>14605</b>		2013  Personal property taxes				980.00	0.00	980.00
Fluvanna County Treasurer PO Box 299 Palmyra, VA 22963	J							
Account No.								
Account No.								
Account No.								
Sheet <b>1</b> of <b>1</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims						Subtotal (Total of this page)	<b>0.00</b>	<b>0.00</b>
						Total (Report on Summary of Schedules)	<b>1,224.00</b>	<b>1,224.00</b>
							<b>0.00</b>	<b>0.00</b>
							<b>1,224.00</b>	<b>1,224.00</b>

B6F (Official Form 6F) (12/07)

In re **William L. Stead,**  
**Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No.							
<b>Advance America</b> <b>498 Culpeper Town Square</b> <b>Suite 3</b> <b>Culpeper, VA 22701</b>	J	Loan					<b>500.00</b>
Account No.							
<b>Advance America</b> <b>1746 Rio Hill Center</b> <b>Charlottesville, VA 22901</b>		Additional notice address for <b>Advance America</b>					<b>Notice Only</b>
Account No.							
<b>Advance America</b> <b>372 Pantops Center</b> <b>Charlottesville, VA 22911</b>		Additional notice address for <b>Advance America</b>					<b>Notice Only</b>
Account No.							
<b>Advance America</b> <b>3441 Seminole Trail</b> <b>Charlottesville, VA 22901</b>		Additional notice address for <b>Advance America</b>					<b>Notice Only</b>
<b>Subtotal</b> (Total of this page)							<b>500.00</b>

21 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
			C	U	D	
Account No. <b>VA-75-1118310</b>		<b>Loan</b>				
<b>Allied Cash Advance 7955 NW 12th Street Suite 300 Doral, FL 33126</b>	<b>W</b>					<b>1,149.00</b>
Account No. <b>3473/10845045</b>						
<b>Allied Storefront LLC c/o National Credit Adjustors PO Box 3023 Hutchinson, KS 67504-3023</b>	<b>W</b>					<b>1,911.00</b>
Account No.		<b>Prior to 2014 Rejected contract re payday loans</b>				
<b>Assurance Consumer Services 7955 NW 12th Street Suite 416 Miami, FL 33126</b>	<b>J</b>					<b>0.00</b>
Account No. <b>5329020999485114</b>		<b>Opened 3/01/06 Last Active 6/29/13 Credit Card</b>				
<b>Bank Of America Po Box 982235 El Paso, TX 79998</b>	<b>H</b>					<b>78.00</b>
Account No.		<b>Loan</b>				
<b>Blue Thread Lending PO Box 525 Hays, MT 59527</b>	<b>W</b>					<b>580.00</b>
Sheet no. <b>1</b> of <b>21</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			<b>3,718.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re

**William L. Stead,**  
**Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
			T	U	D	
Account No. 16272511		Opened 2/01/13 Collection Attorney Ge Money Bank			X	
Calvary Portfolio Services Attention: Bankruptcy Department 500 Summit Lake Dr. Suite 400 Valhalla, NY 10595	W					0.00
Account No. 5155970089406975		Opened 7/01/11 Last Active 3/21/13 Credit Card				
Capital 1 Bank Attn: Bankruptcy Dept. Po Box 30285 Salt Lake City, UT 84130	W					419.00
Account No.						
Capital One c/o Professional Recovery Services PO Box 1880 Voorhees, NJ 08043		Additional notice address for Capital 1 Bank				Notice Only
Account No. 4663040001889712		Opened 9/01/06 Last Active 3/21/13 Credit Card				
Capital 1 Bank Attn: Bankruptcy Dept. Po Box 30285 Salt Lake City, UT 84130	J					719.00
Account No.						
Cash Advance Now 11459 Cronhill Dr, Owings Mills, MD 21117	W	Loan				300.00
Sheet no. 2 of 21 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			1,438.00

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
			C	U	D	
Account No.		Loan				
<b>Cash Yes Ssuite 508, Marina Towers Newton Barracks Road Belize City BZ CA</b>	J					<b>700.00</b>
Account No. <b>334794155</b>		2013 Loan				
<b>CashnetUSA.com PO Box 653990 Cincinnati, OH 45264-3990</b>	W					<b>1,071.00</b>
Account No. <b>VA-6221-25713</b>		2013 Loan				
<b>Cashwell Financial 156 Carlton Rd Suite 102 Charlottesville, VA 22902</b>	H					<b>475.00</b>
Account No. <b>875894425</b>		Opened 12/01/13 Medical services				
<b>Centra Health Inc c/o Creditors Collection S Po Box 21504 Roanoke, VA 24018</b>	W					<b>100.00</b>
Account No.		Additional notice address for Centra Health Inc				
<b>Centra Health 901 West Main Street Freehold, NJ 07728</b>						<b>Notice Only</b>
Sheet no. <b>3</b> of <b>21</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			<b>2,346.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No.						
Centra Health PO Box 2496 Lynchburg, VA 24505		Additional notice address for Centra Health Inc				Notice Only
Account No. 5409790900634991		Opened 1/10/02 Last Active 2/06/06 Credit Card (disputed - SOL)				
Chase Card Services Attn: Bankruptcy Dept Po Box 15298 Wilmington, DE 19850	W			X		0.00
Account No. 00122001*003932		2013 Loan				
Check Into Cash Inc. P.O. Box 550 Cleveland, TN 37364-0550	W					1,024.00
Account No. 0385558		2013 Loan				
CheckFirst #205 3701 Fort Avenue Lynchburg, VA 24501	W					322.00
Account No. 8563029264		Factoring account				
Citibank c/o Midland Funding LLC PO Box 60578 Los Angeles, CA 90060-0578	H					1,750.00
Sheet no. <u>4</u> of <u>21</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			3,096.00

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
			C	U	D	
Account No.						
Midland Funding LLC 8875 Aero Drive Suite 200 San Diego, CA 92123		Additional notice address for Citibank				Notice Only
Account No. 5466160043428653		Opened 7/01/06 Last Active 8/06/13 Credit Card				4,040.00
Citibank Sd, Na Attn: Centralized Bankruptcy Po Box 20363 Kansas City, MO 64195	H					
Account No.						
Citibank c/o GC Services LP 6330 Gulfton Houston, TX 77081		Additional notice address for Citibank Sd, Na				Notice Only
Account No.						
Citibank c/o Allianceone Receivables PO Box 3107 Southeastern, PA 19398-3107		Additional notice address for Citibank Sd, Na				Notice Only
Account No. 6035320491090062		Opened 5/01/06 Last Active 5/30/08 Charge Account (disputed - SOL)				0.00
Citibank Usa Citicorp Credit Services/Attn:Centralize Po Box 20507 Kansas City, MO 64195	H				X	
Sheet no. <u>5</u> of <u>21</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)				4,040.00

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
			C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	
Account No. <b>5178006404087514</b>		Opened 7/01/12 Last Active 5/31/13 Credit Card				<b>523.00</b>
First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104	W					
Account No.						
First Premier Bank Po Box 5524 Sioux Falls, SD 57117		Additional notice address for First Premier Bank				<b>Notice Only</b>
Account No.						
First Premier Bank P.O. Box 5519 Sioux Falls, SD 57117-5519		Additional notice address for First Premier Bank				<b>Notice Only</b>
Account No.						
First Premier Bank Po Box 5529 Sioux Falls, SD 57117-5529		Additional notice address for First Premier Bank				<b>Notice Only</b>
Account No.						
Freedom Cash Lenders On Line No mailing address known	W	http://www.freedomcashadvance.com/contact-us.html				<b>500.00</b>
Sheet no. <b>6</b> of <b>21</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			<b>1,023.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
			C	U	D	
Account No. <b>8562803879</b>		Factoring account				
<b>GE Capital Retail Bank c/o Midland Funding 8875 Aero Drive, Suite 200 San Diego, CA 92123</b>	W					<b>202.00</b>
Account No. <b>16467338</b>	H	Opened 2/01/13 Collection Attorney				
<b>Ge Money Bank c/o Calvary Portfolio Services 500 Summit Lake Dr. Suite 400 Valhalla, NY 10595</b>						<b>1,065.00</b>
Account No.		Additional notice address for Ge Money Bank				Notice Only
<b>GE Money Bank Bankruptcy Dept P.O. Box 103104 Roswell, GA 30076</b>						
Account No. <b>6019180308041439</b>	H	Opened 11/25/01 Last Active 7/31/08 Charge Account (disputed - SOL)			X	
<b>GECRB / HH Gregg Attention: Bankruptcy Po Box 103104 Roswell, GA 30076</b>						<b>0.00</b>
Account No. <b>6045831552534556</b>	W	Opened 7/03/12 Last Active 6/27/13 Charge Account				
<b>Gecrb/belk Po Box 965028 Orlando, FL 32896</b>						<b>154.00</b>
Sheet no. <b>7</b> of <b>21</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)				<b>1,421.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
			C	U	D	
Account No.						
Belk/GEMB c/o Allied Interstate PO Box 4000 Warrenton, VA 20188		Additional notice address for Gecrb/belk				Notice Only
Account No. 7714110259579803		Opened 11/01/10 Factoring Company Account				
General Electric Capital Corpo c/o Lvnv Funding Llc Po Box 10497 Greenville, SC 29603	W					2,871.00
Account No. 6036335098603922		Loan				
Global Client Solutions LLC 4500 S 129th E Ave, Suite 175 Tulsa, OK 74134	W					Unknown
Account No. 5488975021698918		Opened 3/10/03 Last Active 4/01/09 Credit Card (disputed - SOL)				
Hsbc Bank c/o Firsel Law Group Ltd PO Tox 1599 Lombard, IL 60148-8599	W			X		0.00
Account No.						
HSBC Hsbc Card Svcs Attn: Bankruptcy Po Box 5213 Carol Stream, IL 60197		Additional notice address for Hsbc Bank				Notice Only
Sheet no. <u>8</u> of <u>21</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			2,871.00

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
			C	U	D	
Account No. <b>4663-0400-0188-9712</b>	H	Charge account				
<b>HSBC Card Services PO Box 71104 Charlotte, NC 28272-1104</b>	H					<b>629.00</b>
Account No. <b>5155-9700-8940-0675</b>	W	Charge account				
<b>HSBC Card Services PO Box 71104 Charlotte, NC 28272-1104</b>	W					<b>294.00</b>
Account No. <b>414531587</b>	W	Opened 4/01/09 Collection Attorney (disputed - SOL)			X	
<b>Hsbc Card Services Inc. c/o The Bureaus Inc. 1717 Central St. Evanston, IL 60201</b>	W					<b>0.00</b>
Account No.						
<b>HSBC Hsbc Card Svcs Attn: Bankruptcy Po Box 5213 Carol Stream, IL 60197</b>		Additional notice address for Hsbc Card Services Inc.				<b>Notice Only</b>
Account No. <b>991174</b>		Loan				
<b>Loan Shop Online 2207 Concord Pike #250 Wilmington, DE 19803</b>	W					<b>585.00</b>
Sheet no. <b>9</b> of <b>21</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			<b>1,508.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
			C	U	D	
Account No. <b>F96394383</b>		Factoring account (GE Capital Corp)				
<b>LVNV Funding c/o Northland Group PO Box 390846 Minneapolis, MN 55439</b>	W					<b>2,622.00</b>
Account No.						
<b>LVNV Funding PO Box 10584 Greenville, SC 29603-0584</b>		Additional notice address for LVNV Funding				<b>Notice Only</b>
Account No. <b>GV14000045-00</b>		Return date 6/19/14 Pending litigation				
<b>Lyon, John S DDS c/o Scott Kroner PO Box 2737 Charlottesville, VA 22902</b>	J					<b>1,000.00</b>
Account No.						
<b>Lyon, John DDS 2700 Hydraulic Road Charlottesville, VA 22901</b>		Additional notice address for Lyon, John S DDS				<b>Notice Only</b>
Account No. <b>13074753 &amp; 13125241</b>		2011 Medical services				
<b>Martha Jefferson Hospital c/o JL Walston &amp; Associates 326 South Main Street Emporia, VA 23847</b>	H					<b>65.00</b>
Sheet no. <b>10</b> of <b>21</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			<b>3,687.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No.						
<b>Martha Jefferson Hospital P.O. Box 2556 Charlottesville, VA 22902</b>		<b>Additional notice address for Martha Jefferson Hospital</b>				<b>Notice Only</b>
Account No.						
<b>Martha Jefferson Hospital P.O. Box 759132 Baltimore, MD 21275</b>		<b>Additional notice address for Martha Jefferson Hospital</b>				<b>Notice Only</b>
Account No.						
<b>Martha Jefferson Hospital 500 Martha Jefferson Drive Charlottesville, VA 22911</b>		<b>Additional notice address for Martha Jefferson Hospital</b>				<b>Notice Only</b>
Account No.						
<b>Martha Jefferson Hospital c/o Sentara Collections PO Box 79698 Baltimore, MD 21279-0698</b>		<b>Additional notice address for Martha Jefferson Hospital</b>				<b>Notice Only</b>
Account No. <b>13442306</b>		<b>Medical services</b>				<b>950.00</b>
<b>Martha Jefferson Hospital c/o CCC PO Box 120568 Newport News, VA 23612-0568</b>	H					
Sheet no. <b>11</b> of <b>21</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			<b>950.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
			C	U	D	
Account No. <b>13442306</b>		<b>Medical services</b>				
<b>Martha Jefferson Hospital P.O. Box 2556 Charlottesville, VA 22902</b>	H					<b>1,990.00</b>
Account No. <b>13288</b>		<b>12/13 Medical services</b>				
<b>Martha Jefferson Medical Group MJ Medical Enterprises P.O. Box 1583 Charlottesville, VA 22902</b>	W					<b>23.00</b>
Account No.						
<b>Martha Jefferson Medical Group PO Box 1583 Charlottesville, VA 22903</b>		<b>Additional notice address for Martha Jefferson Medical Group</b>				<b>Notice Only</b>
Account No. <b>1113240473</b>		<b>Opened 11/01/11 Medical services</b>				
<b>Martha Jefferson Orthopedics c/o Charlottesville Bureau 3690 Dobleann Dr Charlottesville, VA 22911</b>	H					<b>41.00</b>
Account No.						
<b>Martha Jefferson Orthopedics 310 Old Ivy Way Suite 202 Charlottesville, VA 22903-4896</b>		<b>Additional notice address for Martha Jefferson Orthopedics</b>				<b>Notice Only</b>
Sheet no. <b>12</b> of <b>21</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			<b>2,054.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
			C	U	D	
Account No. <b>1120680598</b>		<b>Opened 3/01/12 Medical services</b>				
<b>Mathes, Donald D Md c/o Charlottesville Bureau 3690 Dobleann Dr Charlottesville, VA 22911</b>	H					<b>88.00</b>
Account No.						
<b>Mathes, Donald D Md P.O. Box 800710 Charlottesville, VA 22908</b>	H	<b>Additional notice address for Mathes, Donald D Md</b>				<b>Notice Only</b>
Account No. <b>4120614069342538</b>		<b>Opened 12/01/12 Last Active 5/17/13 Credit Card</b>				
<b>Merrick Bk Attn: Bankruptcy P.O. Box 9201 Old Bethpage, NY 11804</b>	W					<b>702.00</b>
Account No.		<b>Loan</b>				
<b>Mobile Loans P.O. Box 1409 Marksville, LA 71351</b>	W					<b>1,300.00</b>
Account No. <b>0037317843</b>		<b>Medical services</b>				
<b>Monticello Community Surgery c/o NCO Financial Systems PO Box 15372 Wilmington, DE 19850-5372</b>	H					<b>214.00</b>
Sheet no. <b>13</b> of <b>21</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			<b>2,304.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
			C	U	D	
Account No.						
<b>Monticello Community Surgery Center 595 Martha Jefferson Drive Suite 290 Charlottesville, VA 22911</b>		<b>Additional notice address for Monticello Community Surgery</b>				<b>Notice Only</b>
Account No.		<b>Loan</b>				
<b>Mountain Lake Servicing No known mailing address</b>	<b>W</b>					<b>580.00</b>
Account No.		<b>http://www.netpdl.com/</b>				
<b>NET PDL No known mailing address</b>	<b>W</b>					<b>200.00</b>
Account No.		<b>Loan</b>				
<b>North Cash Advance North Star Finance, LLC PO box 498 Hays, MT 59527</b>	<b>W</b>					<b>500.00</b>
Account No. <b>2788843</b>		<b>Loan</b>				
<b>Northstar Finance LLC PO Box 498 Hays, MT 59527</b>	<b>W</b>					<b>180.00</b>
Sheet no. <b>14</b> of <b>21</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			<b>1,460.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
			C	U	D	
Account No. <b>6074689333167072</b>		Opened 9/01/13 Last Active 3/29/14 Unsecured				<b>8,935.00</b>
Onemain Fi Po Box 499 Hanover, MD 21076	W					
Account No.						
OneMain Financial Bankruptcy Dept. PO Box 6042 Sioux Falls, SD 57117-6042		Additional notice address for Onemain Fi				<b>Notice Only</b>
Account No. <b>4121370400951318</b>		Opened 12/15/00 Last Active 1/31/06 Secured Credit Card (disputed - SOL)			X	<b>0.00</b>
Providian Financial / Chase Chase Card Services/Attn: Bankruptcy Dep Po Box 15298 Wilmington, DE 19850	W					
Account No. <b>7714210168274603</b>		Opened 5/25/02 Last Active 7/10/09 Charge Account				<b>1,066.00</b>
Sams Club / GEMB Attention: Bankruptcy Department Po Box 103104 Roswell, GA 30076	H					
Account No.						
GEMB/Sams Club c/o Cavalry PO Box 520 Valhalla, NY 10595		Additional notice address for Sams Club / GEMB				<b>Notice Only</b>
Sheet no. <b>15</b> of <b>21</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			<b>10,001.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
			C	U	D	
Account No. <b>CHD1257028753</b>		Collection agent for unknown creditor				
<b>SCA Credit Services Inc. 1502 Williamson Road NE Roanoke, VA 24012</b>	W					<b>119.00</b>
Account No. <b>27539</b>		2014 Medical services				
<b>Schildwachter, Thomas MD. 914 East Jefferson Street Suite 102 Charlottesville, VA 22902</b>	H					<b>339.00</b>
Account No.		2014 Chiropractic services				
<b>Scott Wagner Chiropractic 147 Zan Road Charlottesville, VA 22901</b>	W					<b>372.00</b>
Account No. <b>5049940189050882</b>		Opened 5/09/06 Last Active 1/10/13 Charge Account				
<b>Sears/cbna Po Box 6189 Sioux Falls, SD 57117</b>	H					<b>1,751.00</b>
Account No.		Additional notice address for Sears/cbna				
<b>Sears c/o Client Services Inc. 3451 Harry S Truman Blvd Saint Charles, MO 63301-4047</b>						<b>Notice Only</b>
Sheet no. <b>16</b> of <b>21</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)				<b>2,581.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
			C	U	D	
Account No. <b>2133378212</b>		Opened 12/01/13 Medical services				
<b>Sentara Martha Jefferson Hospi c/o Credit Control Corp 11821 Rock Landing Dr Newport News, VA 23606</b>	H					<b>949.00</b>
Account No.						
<b>Martha Jefferson Hospital P.O. Box 2556 Charlottesville, VA 22902</b>		Additional notice address for Sentara Martha Jefferson Hospi				<b>Notice Only</b>
Account No.						
<b>Martha Jefferson Hospital P.O. Box 759132 Baltimore, MD 21275</b>		Additional notice address for Sentara Martha Jefferson Hospi				<b>Notice Only</b>
Account No.						
<b>Martha Jefferson Hospital 500 Martha Jefferson Drive Charlottesville, VA 22911</b>		Additional notice address for Sentara Martha Jefferson Hospi				<b>Notice Only</b>
Account No.						
<b>Martha Jefferson Hospital c/o Sentara Collections PO Box 79698 Baltimore, MD 21279-0698</b>		Additional notice address for Sentara Martha Jefferson Hospi				<b>Notice Only</b>
Sheet no. <u>17</u> of <u>21</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>949.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT T	UNLIQUIDATED D	DISPUTED E	AMOUNT OF CLAIM
		Loan					
Account No. <b>40356965-101228875</b>							
<b>Sovereign Advance</b> c/o CCB Credit Services 5300 S 6th Street Springfield, IL 62703-5184							<b>520.00</b>
Account No.							
<b>Sovereign Advance</b> P.O. Box 10 Parshall, ND 58770			<b>Additional notice address for Sovereign Advance</b>				<b>Notice Only</b>
Account No. <b>4036240004513877</b>			<b>Opened 12/01/00 Last Active 3/23/09 Credit Card (disputed - SOL)</b>				
<b>Sst/columbus Bank&amp;trus</b> Attn:Bankruptcy Po Box 3997 St. Joseph, MO 64503					X		<b>0.00</b>
Account No. <b>4036240006400040</b>			<b>Opened 1/01/02 Last Active 3/23/09 Credit Card (disputed - SOL)</b>				
<b>Sst/columbus Bank&amp;trus</b> Attn:Bankruptcy Po Box 3997 St. Joseph, MO 64503					X		<b>0.00</b>
Account No. <b>100014153</b>			<b>Closed checking account</b>				
<b>SunTrust Bank</b> c/o CBCS PO Box 163729 Columbus, OH 43216-3729							<b>231.00</b>
Sheet no. <b>18</b> of <b>21</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				Subtotal (Total of this page)			<b>751.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No.						
<b>Suntrust DDA Recovery Dept P.O. Box 26150/VA-RIC-9394 Richmond, VA 23260-6150</b>		<b>Additional notice address for SunTrust Bank</b>				<b>Notice Only</b>
Account No.						
<b>SunTrust Recovery Department P.O. Box 85041 Richmond, VA 23285-5041</b>		<b>Additional notice address for SunTrust Bank</b>				<b>Notice Only</b>
Account No.						
<b>SunTrust Bank c/o Dana S. Bruce, R/A 919 East Main St, 13th Floor Richmond, VA 23219</b>		<b>Additional notice address for SunTrust Bank</b>				<b>Notice Only</b>
Account No. <b>2123120002</b>		<b>Opened 11/01/12 Last Active 12/21/12 Medical services</b>				
<b>Swisher Dental Pllc 1 c/o Credit Control Corp 11821 Rock Landing Dr Newport News, VA 23606</b>	<b>H</b>					<b>197.00</b>
Account No.						
<b>Swisher Dental Pllc 259 Hydraulic Ridge Rd #203 Charlottesville, VA 22901</b>		<b>Additional notice address for Swisher Dental Pllc 1</b>				<b>Notice Only</b>
Sheet no. <b>19</b> of <b>21</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			<b>197.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
			C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	
Account No. <b>TBID44022</b>		Disputed - SOL			X	<b>0.00</b>
<b>The Bureaus Inc.</b> c/o Stephens & Michaels Associates PO Box 109 Salem, NH 03079-0109	W					
Account No.						
<b>The Bureaus Inc.</b> 650 Dundee Rd Suite 370 Northbrook, IL 60062		Additional notice address for <b>The Bureaus Inc.</b>				<b>Notice Only</b>
Account No.		Loan				
<b>VIP Loan Shop, The</b> 4 Solomon's Arcade, Charlestow Nevis West Indies	J					<b>600.00</b>
Account No. <b>LD2800</b>		Closed savings account				
<b>Wells Fargo Bank</b> c/o Integrity Solution Services Inc PO Box 7230 Overland Park, KS 66207-0230	W					<b>105.00</b>
Account No.						
<b>Wells Fargo Bank</b> Bankruptcy 1 Home Campus #2303-01A Des Moines, IA 50328-0001		Additional notice address for <b>Wells Fargo Bank</b>				<b>Notice Only</b>
Sheet no. <b>20</b> of <b>21</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			<b>705.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re

**William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No.						
Wells Fargo Bank PO Box 5058 MAC: P6052-021 Portland, OR 97208-5058		Additional notice address for Wells Fargo Bank				Notice Only
Account No.						
Account No.						
Account No.						
Account No.						
Sheet no. <u>21</u> of <u>21</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			<b>0.00</b>
			Total (Report on Summary of Schedules)			<b>47,600.00</b>

In re **William L. Stead,  
Cathy M. Stead** Case No. \_\_\_\_\_

Debtors

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code,  
of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.  
State whether lease is for nonresidential real property.  
State contract number of any government contract.

**Assurance Conumser Services  
7955 NW 12th Street  
Suite 416  
Miami, FL 33126**

**Client Services Agreement re payday loans  
payback; debtors to reject**

**nTelos  
PO Box 580113  
Charlotte, NC 28258-0113**

**Cell phone contract; debtors to assume**

In re **William L. Stead,  
Cathy M. Stead**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

**0**

continuation sheets attached to Schedule of Codebtors

Fill in this information to identify your case:

Debtor 1	<u>William L. Stead</u>
Debtor 2 (Spouse, if filing)	<u>Cathy M. Stead</u>
United States Bankruptcy Court for the:	<u>WESTERN DISTRICT OF VIRGINIA</u>
Case number (if known)	_____

Check if this is:

- An amended filing  
 A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form B 6I

### Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status*	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
Occupation	Maintenance	Property Manager
Employer's name	Virginia Industries for the Blind	JDC Management LLC
Employer's address	7004 Franklin Farms Drive Richmond, VA 23229-5019	Attention - Courtney Knebel 3305 South Morgan's Point Suite 2B Mount Pleasant, SC 29466

How long employed there?

11 years

2 years

\*See Attachment for Additional Employment Information

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>2,782.00</u> \$ <u>5,417.00</u>
3. Estimate and list monthly overtime pay.	3. +\$ <u>0.00</u> +\$ <u>0.00</u>
4. Calculate gross Income. Add line 2 + line 3.	4. \$ <u>2,782.00</u> \$ <u>5,417.00</u>

Debtor 1 **William L. Stead**  
 Debtor 2 **Cathy M. Stead**

Case number (if known) \_\_\_\_\_

Copy line 4 here .....

## 5. List all payroll deductions:

- 5a. Tax, Medicare, and Social Security deductions  
 5b. Mandatory contributions for retirement plans  
 5c. Voluntary contributions for retirement plans  
 5d. Required repayments of retirement fund loans  
 5e. Insurance  
 5f. Domestic support obligations  
 5g. Union dues  
 5h. Other deductions. Specify: Flex administration fees

6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.

7. Calculate total monthly take-home pay. Subtract line 6 from line 4.

## 8. List all other income regularly received:

- 8a. Net income from rental property and from operating a business, profession, or farm

Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.

- 8b. Interest and dividends

- 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive

Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.

- 8d. Unemployment compensation

- 8e. Social Security

- 8f. Other government assistance that you regularly receive

Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.

Specify: \_\_\_\_\_

- 8g. Pension or retirement income

- 8h. Other monthly income. Specify: Net income from 2nd job

9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.

10. Calculate monthly income. Add line 7 + line 9.

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

## 11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify: \_\_\_\_\_

11. +\$ 0.00

## 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.

Write that amount on the *Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data*, if it applies

12. \$ 6,528.00

**Combined monthly income**

## 13. Do you expect an increase or decrease within the year after you file this form?

No.

Yes. Explain: Debtor husband's 2nd job is seasonal and sporadic.

Debtor 1 **William L. Stead**  
Debtor 2 **Cathy M. Stead**

Case number (if known) \_\_\_\_\_

**Official Form B 6I  
Attachment for Additional Employment Information**

<b>Debtor</b>		
Occupation	<b>Security</b>	
Name of Employer	<b>Jefferson Theater Productions LLC</b>	
How long employed	<b>5 years</b>	
Address of Employer	<b>PO Box 1467 Charlottesville, VA 22902</b>	<b>Calculated as follows: Average bi-weekly gross of \$167.60, less average bi-weekly taxes of \$13.38, equals average bi-weekly net of \$154.22, x 26 = \$4,009.72 average yearly net, divided by 12 = \$334.14 average monthly net.</b>

Fill in this information to identify your case:

Debtor 1	<u>William L. Stead</u>
Debtor 2	<u>Cathy M. Stead</u>
(Spouse, if filing)	
United States Bankruptcy Court for the:	<u>WESTERN DISTRICT OF VIRGINIA</u>
Case number (If known)	

Check if this is:

- An amended filing  
 A supplement showing post-petition chapter 13 expenses as of the following date:

MM / DD / YYYY

- A separate filing for Debtor 2 because Debtor 2 maintains a separate household

## Official Form B 6J

### Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

##### 1. Is this a joint case?

- No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?  
 No  
 Yes. Debtor 2 must file a separate Schedule J.

##### 2. Do you have dependents? No

Do not list Debtor 1 and  Yes. Fill out this information for Debtor 2.  
 each dependent.....

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes

##### 3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 6I.)

##### 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

#### Your expenses

4. \$ 1,023.00

##### If not included in line 4:

- 4a. Real estate taxes  
 4b. Property, homeowner's, or renter's insurance  
 4c. Home maintenance, repair, and upkeep expenses  
 4d. Homeowner's association or condominium dues  
 5. Additional mortgage payments for your residence, such as home equity loans

4a. \$	<u>0.00</u>
4b. \$	<u>0.00</u>
4c. \$	<u>50.00</u>
4d. \$	<u>106.00</u>
5. \$	<u>0.00</u>

Debtor 1 **William L. Stead**  
 Debtor 2 **Cathy M. Stead**

Case number (if known) \_\_\_\_\_

6. <b>Utilities:</b>	6a. Electricity, heat, natural gas	6a. \$ <b>250.00</b>
	6b. Water, sewer, garbage collection	6b. \$ <b>175.00</b>
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <b>280.00</b>
	6d. Other. Specify: _____	6d. \$ <b>0.00</b>
7. <b>Food and housekeeping supplies</b>	7. \$ <b>650.00</b>	
8. <b>Childcare and children's education costs</b>	8. \$ <b>0.00</b>	
9. <b>Clothing, laundry, and dry cleaning</b>	9. \$ <b>50.00</b>	
10. <b>Personal care products and services</b>	10. \$ <b>40.00</b>	
11. <b>Medical and dental expenses</b>	11. \$ <b>100.00</b>	
12. <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <b>600.00</b>	
13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$ <b>67.00</b>	
14. <b>Charitable contributions and religious donations</b>	14. \$ <b>0.00</b>	
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$ <b>0.00</b>	
15b. Health insurance	15b. \$ <b>0.00</b>	
15c. Vehicle insurance	15c. \$ <b>576.00</b>	
15d. Other insurance. Specify: _____	15d. \$ <b>0.00</b>	
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <b>Personal property taxes</b>	16. \$ <b>200.00</b>	
Specify: <b>Tags &amp; Inspections</b>	\$ <b>35.00</b>	
17. <b>Installment or lease payments:</b>		
17a. Car payments for Vehicle 1	17a. \$ <b>0.00</b>	
17b. Car payments for Vehicle 2	17b. \$ <b>0.00</b>	
17c. Other. Specify: _____	17c. \$ <b>0.00</b>	
17d. Other. Specify: _____	17d. \$ <b>0.00</b>	
18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).</b>	18. \$ <b>0.00</b>	
19. <b>Other payments you make to support others who do not live with you.</b> Specify: _____	\$ <b>0.00</b>	
20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a. Mortgages on other property	20a. \$ <b>0.00</b>	
20b. Real estate taxes	20b. \$ <b>0.00</b>	
20c. Property, homeowner's, or renter's insurance	20c. \$ <b>0.00</b>	
20d. Maintenance, repair, and upkeep expenses	20d. \$ <b>0.00</b>	
20e. Homeowner's association or condominium dues	20e. \$ <b>0.00</b>	
21. <b>Other:</b> Specify: <b>Pet expenses</b>	21. +\$ <b>320.00</b>	
22. <b>Your monthly expenses.</b> Add lines 4 through 21. The result is your monthly expenses.	22. \$ <b>4,522.00</b>	
23. <b>Calculate your monthly net income.</b> 23a. Copy line 12 ( <i>your combined monthly income</i> ) from Schedule I. 23b. Copy your monthly expenses from line 22 above.	23a. \$ <b>6,528.00</b> 23b. -\$ <b>4,522.00</b>	
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$ <b>2,006.00</b>	
24. <b>Do you expect an increase or decrease in your expenses within the year after you file this form?</b> For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		

B6 Declaration (Official Form 6 - Declaration). (12/07)

**United States Bankruptcy Court  
Western District of Virginia**

In re William L. Stead  
Cathy M. Stead

Debtor(s)

Case No.

Chapter 13

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 46 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date May 9, 2014

Signature /s/ William L. Stead  
William L. Stead  
Debtor

Date May 9, 2014

Signature /s/ Cathy M. Stead  
Cathy M. Stead  
Joint Debtor

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.

B7 (Official Form 7) (04/13)

**United States Bankruptcy Court**  
**Western District of Virginia**

In re  
William L. Stead  
Cathy M. Stead

Case No.  
 Chapter

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**13**

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Debtor(s)

**STATEMENT OF FINANCIAL AFFAIRS**

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

***DEFINITIONS***

*"In business."* A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

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**1. Income from employment or operation of business**

- None  State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
<b>\$11,225.00</b>	<b>2014 employment income - husband (as of 4/16/2014)</b>
<b>\$17,500.00</b>	<b>2014 employment income - wife (as of 4/4/2014)</b>
<b>\$36,590.00</b>	<b>2013 employment income - husband</b>
<b>\$51,132.00</b>	<b>2013 employment income - wife</b>
<b>\$36,000.00</b>	<b>2012 employment income - husband (estimated)</b>
<b>\$80,000.00</b>	<b>2012 employment income - wife (estimated)</b>

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**2. Income other than from employment or operation of business**

- None  State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
<b>\$5.00</b>	<b>2013 capital gain</b>
<b>\$7,446.00</b>	<b>2013 IRA distributions</b>

**3. Payments to creditors**

- None  Complete a. or b., as appropriate, and c.

- a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
<b>Ocwen Loan Servicing P.O. Box 740616 Atlanta, GA 30374</b>	<b>Monthly</b>	<b>\$1,023.00</b>	<b>\$164,938.00</b>
<b>Chase Po Box 24696 Columbus, OH 43224</b>	<b>Monthly</b>	<b>\$521.00</b>	<b>\$43,073.00</b>
<b>Santander Consumer Usa Po Box 961245 Ft Worth, TX 76161</b>	<b>Monthly</b>	<b>\$857.00</b>	<b>\$32,224.00</b>
<b>Regional Acceptance Co 10051 Midlothian Tpke North Chesterfield, VA 23235</b>	<b>Monthly</b>	<b>\$623.00</b>	<b>\$23,927.00</b>
<b>Harley Davidson Financial Attention: Bankruptcy Po Box 22048 Carson City, NV 89721</b>	<b>Monthly</b>	<b>\$410.00</b>	<b>\$15,901.00</b>
<b>Lendmark Financial Services 1862 Abbey Road Charlottesville, VA 22911</b>	<b>Monthly</b>	<b>\$365.00</b>	<b>\$11,260.00</b>
<b>Onemain Fi Po Box 499 Hanover, MD 21076</b>	<b>Monthly</b>	<b>\$318.00</b>	<b>\$8,935.00</b>
<b>Martha Jefferson Hospital P.O. Box 2556 Charlottesville, VA 22902</b>	<b>3/2014 - to get warrant in debt dismissed</b>	<b>\$1,000.00</b>	<b>\$1,990.00</b>

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- None  b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING

- None  c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING

#### **4. Suits and administrative proceedings, executions, garnishments and attachments**

- None  a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
<b>John S Lyon DDS v. Cathy &amp; William Stead, GV14000045-00</b>	<b>Civil</b>	<b>Albemarle County General District Court</b>	<b>Return date 6/19/14</b>
<b>Martha Jefferson Hospital v. William Lydell Stead, GV13012510-00</b>	<b>Civil</b>	<b>Albemarle County General District Court</b>	<b>Nonsuited 3/28/14</b>

- None  b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY

#### **5. Repossessions, foreclosures and returns**

- None  List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY

#### **6. Assignments and receiverships**

- None  a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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- None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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**7. Gifts**

- None List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
--	--------------------------------	--------------	-------------------------------

**8. Losses**

- None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
-----------------------------------	--	--------------

**9. Payments related to debt counseling or bankruptcy**

- None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Boyle, Bain, Reback & Slayton 420 Park Street Charlottesville, VA 22902	4/24/2014; 5/1/2014	\$350.00; \$150.00
Alliance Credit Counseling 13777 Ballantyne Place Suite 100 Charlotte, NC 28277	5/7/14	\$39.00

**10. Other transfers**

- None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFeree, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
None	b. List all property transferred by the debtor within <b>ten years</b> immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.	
NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

---

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION  
**Wells Fargo Bank**  
**c/o Integrity Solution Services Inc**  
**PO Box 7230**  
**Overland Park, KS 66207-0230**

TYPE OF ACCOUNT, LAST FOUR  
 DIGITS OF ACCOUNT NUMBER,  
 AND AMOUNT OF FINAL BALANCE

**Checking/savings; \$1,200.00**

AMOUNT AND DATE OF SALE  
 OR CLOSING

**12/2013**

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#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK  
 OR OTHER DEPOSITORY

NAMES AND ADDRESSES  
 OF THOSE WITH ACCESS  
 TO BOX OR DEPOSITORY

DESCRIPTION  
 OF CONTENTS

DATE OF TRANSFER OR  
 SURRENDER, IF ANY

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#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

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#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

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#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

NAME USED

DATES OF OCCUPANCY

---

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### **17. Environmental Information.**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

- None  a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None  b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None  c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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#### **18 . Nature, location and name of business**

- None  a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
Cathy M. Stead	(ITIN)/ COMPLETE EIN Debtor's	513 Jefferson Drive Palmyra, VA 22963	1099 contractor for Mary Kay	2007 to present

- None  b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
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The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

*(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

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#### 19. Books, records and financial statements

- None    a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or  
■ supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

- None    b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books  
■ of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

- None    c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records  
□ of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

Cathy M. Stead

513 Jefferson Drive  
Palmyra, VA 22963

- None    d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was  
■ issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

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#### 20. Inventories

- None    a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory,  
■ and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY  
(Specify cost, market or other basis)

- None    b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.  
■

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY  
RECORDS

---

#### 21 . Current Partners, Officers, Directors and Shareholders

- None    a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.  
■

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

- None    b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,  
■ controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE  
OF STOCK OWNERSHIP

B7 (Official Form 7) (04/13)

8

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**22 . Former partners, officers, directors and shareholders**

- None  a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME	ADDRESS	DATE OF WITHDRAWAL
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- None  b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS	TITLE	DATE OF TERMINATION
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**23 . Withdrawals from a partnership or distributions by a corporation**

- None  If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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**24. Tax Consolidation Group.**

- None  If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION	TAXPAYER IDENTIFICATION NUMBER (EIN)
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**25. Pension Funds.**

- None  If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND	TAXPAYER IDENTIFICATION NUMBER (EIN)
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\* \* \* \* \*

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date May 9, 2014

Signature /s/ William L. Stead  
William L. Stead  
Debtor

Date May 9, 2014

Signature /s/ Cathy M. Stead  
Cathy M. Stead  
Joint Debtor

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571*

United States Bankruptcy Court  
Western District of Virginia

In re William L. Stead  
Cathy M. Stead

Case No.  
Chapter

Debtor(s)

13

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

- Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$ <u>2,900.00</u>
Prior to the filing of this statement I have received .....	\$ <u>0.00</u>
Balance Due .....	\$ <u>2,900.00</u>

- \$ 281.00 of the filing fee has been paid.

- The source of the compensation paid to me was:

Debtor       Other (specify):

- The source of compensation to be paid to me is:

Debtor       Other (specify): **Chapter 13 plan**

- I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

- In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- [Other provisions as needed]

**Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.**

- By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: May 9, 2014

/s/ Jonathan S. Woodruff VSB  
Jonathan S. Woodruff VSB #66082  
Boyle, Bain, Reback & Slayton  
420 Park Street  
Charlottesville, VA 22902  
(434) 979-7900 Fax: (434) 977-3298  
marshall.slayton@bbrs.net;  
jonathan.woodruff@bbrs.net

**UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF VIRGINIA**

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)  
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

**1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

**Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total Fee \$306)**

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)**

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1,167 filing fee, \$46 administrative fee: Total fee \$1,213)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at [http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

B 201B (Form 201B) (12/09)

**United States Bankruptcy Court  
Western District of Virginia**

In re William L. Stead  
Cathy M. Stead

Debtor(s)

Case No.

Chapter

13

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)  
UNDER § 342(b) OF THE BANKRUPTCY CODE**

**Certification of Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

William L. Stead  
Cathy M. Stead

Printed Name(s) of Debtor(s)

Case No. (if known) \_\_\_\_\_

X <u>/s/ William L. Stead</u>	<b>May 9, 2014</b>
Signature of Debtor	Date
X <u>/s/ Cathy M. Stead</u>	<b>May 9, 2014</b>
Signature of Joint Debtor (if any)	Date

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**Instructions:** Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

**United States Bankruptcy Court  
Western District of Virginia**

In re **William L. Stead**  
**Cathy M. Stead**

Debtor(s)

Case No.  
Chapter

**13**

**VERIFICATION OF CREDITOR MATRIX**

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: May 9, 2014

/s/ William L. Stead

**William L. Stead**

Signature of Debtor

Date: May 9, 2014

/s/ Cathy M. Stead

**Cathy M. Stead**

Signature of Debtor

Stead, William and Cathy -

AARON'S RENT TO OWN  
309 EAST PACES FERRY ROAD NE  
ATLANTA, GA 30305-2377

AARON'S SALES & LEASE OWNERSHIP  
330 PANTOPS CENTER  
CHARLOTTESVILLE, VA 22911

ADVANCE AMERICA  
498 CULPEPER TOWN SQUARE  
SUITE 3  
CULPEPER, VA 22701

ADVANCE AMERICA  
1746 RIO HILL CENTER  
CHARLOTTESVILLE, VA 22901

ADVANCE AMERICA  
372 PANTOPS CENTER  
CHARLOTTESVILLE, VA 22911

ADVANCE AMERICA  
3441 SEMINOLE TRAIL  
CHARLOTTESVILLE, VA 22901

ALLIED CASH ADVANCE  
7955 NW 12TH STREET  
SUITE 300  
DORAL, FL 33126

ALLIED STOREFRONT LLC  
C/O NATIONAL CREDIT ADJUSTORS  
PO BOX 3023  
HUTCHINSON, KS 67504-3023

ASSURANCE CONUMSER SERVICES  
7955 NW 12TH STREET  
SUITE 416  
MIAMI, FL 33126

BANK OF AMERICA  
PO BOX 982235  
EL PASO, TX 79998

Stead, William and Cathy -

BELK/GEMB  
C/O ALLIED INTERSTATE  
PO BOX 4000  
WARRENTON, VA 20188

BLUE THREAD LENDING  
PO BOX 525  
HAYS, MT 59527

CALVARY PORTFOLIO SERVICES  
ATTENTION: BANKRUPTCY DEPARTMENT  
500 SUMMIT LAKE DR. SUITE 400  
VALHALLA, NY 10595

CAPITAL 1 BANK  
ATTN: BANKRUPTCY DEPT.  
PO BOX 30285  
SALT LAKE CITY, UT 84130

CAPITAL ONE  
C/O PROFESSIONAL RECOVERY SERVICES  
PO BOX 1880  
VOORHEES, NJ 08043

CASH ADVANCE NOW  
11459 CRONHILL DR,  
OWINGS MILLS, MD 21117

CASHNETUSA.COM  
PO BOX 653990  
CINCINNATI, OH 45264-3990

CASHWELL FINANCIAL  
156 CARLTON RD  
SUITE 102  
CHARLOTTESVILLE, VA 22902

CENTRA HEALTH  
901 WEST MAIN STREET  
FREEHOLD, NJ 07728

CENTRA HEALTH  
PO BOX 2496  
LYNCHBURG, VA 24505

Stead, William and Cathy -

CENTRA HEALTH INC  
C/O CREDITORS COLLECTION S  
PO BOX 21504  
ROANOKE, VA 24018

CHASE  
PO BOX 24696  
COLUMBUS, OH 43224

CHASE CARD SERVICES  
ATTN: BANKRUPTCY DEPT  
PO BOX 15298  
WILMINGTON, DE 19850

CHASE HOME FINANCE LLC  
3415 VISION DRIVE  
COLUMBUS, OH 43219

CHASE HOME FINANCE LLC  
P.O. BOX 44090  
JACKSONVILLE, FL 32231-4909

CHECK INTO CASH INC.  
P.O. BOX 550  
CLEVELAND, TN 37364-0550

CHECKFIRST #205  
3701 FORT AVENUE  
LYNCHBURG, VA 24501

CITIBANK  
C/O MIDLAND FUNDING LLC  
PO BOX 60578  
LOS ANGELES, CA 90060-0578

CITIBANK  
C/O GC SERVICES LP  
6330 GULFTON  
HOUSTON, TX 77081

CITIBANK  
C/O ALLIANCEONE RECEIVABLES  
PO BOX 3107  
SOUTHEASTERN, PA 19398-3107

Stead, William and Cathy -

CITIBANK SD, NA  
ATTN: CENTRALIZED BANKRUPTCY  
PO BOX 20363  
KANSAS CITY, MO 64195

CITIBANK USA  
CITICORP CREDIT SERVICES/ATTN:CENTRALIZE  
PO BOX 20507  
KANSAS CITY, MO 64195

EQUIFAX INFORMATION SERVICE CENTER  
ATTN: DISPUTE RESOLUTION DEPARTMENT  
PO BOX 105873  
ATLANTA, GA 30348

EXPERIAN INFORMATION SOLUTIONS  
ATTN: SUPERVISOR, LEGAL DEPARTMENT  
PO BOX 1240  
ALLEN, TX 75013

FIRST PREMIER BANK  
601 S MINNESOTA AVE  
SIOUX FALLS, SD 57104

FIRST PREMIER BANK  
PO BOX 5524  
SIOUX FALLS, SD 57117

FIRST PREMIER BANK  
P.O. BOX 5519  
SIOUX FALLS, SD 57117-5519

FIRST PREMIER BANK  
PO BOX 5529  
SIOUX FALLS, SD 57117-5529

FLUVANNA COUNTY TREASURER  
PO BOX 299  
PALMYRA, VA 22963

FREEDOM CASH LENDERS ON LINE  
NO MAILING ADDRESS KNOWN

Stead, William and Cathy -

GE CAPITAL RETAIL BANK  
C/O MIDLAND FUNDING  
8875 AERO DRIVE, SUITE 200  
SAN DIEGO, CA 92123

GE MONEY BANK  
C/O CALVARY PORTFOLIO SERVICES  
500 SUMMIT LAKE DR. SUITE 400  
VALHALLA, NY 10595

GE MONEY BANK  
BANKRUPTCY DEPT  
P.O. BOX 103104  
ROSWELL, GA 30076

GECRB / HH GREGG  
ATTENTION: BANKRUPTCY  
PO BOX 103104  
ROSWELL, GA 30076

GECRB/BELK  
PO BOX 965028  
ORLANDO, FL 32896

GEMB/SAMS CLUB  
C/O CAVALRY  
PO BOX 520  
VALHALLA, NY 10595

GENERAL ELECTRIC CAPITAL CORPO  
C/O LVNV FUNDING LLC  
PO BOX 10497  
GREENVILLE, SC 29603

GLOBAL CLIENT SOLUTIONS LLC  
4500 S 129TH E AVE, SUITE 175  
TULSA, OK 74134

HARLEY DAVIDSON FINANCIAL  
ATTENTION: BANKRUPTCY  
PO BOX 22048  
CARSON CITY, NV 89721

Stead, William and Cathy -

HARLEY DAVIDSON FINANCIAL  
ATTENTION: BANKRUPTCY  
PO BOX 182125  
COLUMBUS, OH 43218

HARLEY-DAVIDSON CREDIT CORP.  
P.O. BOX 829009  
DALLAS, TX 75382-9009

HSBC  
HSBC CARD SRVS ATTN: BANKRUPTCY  
PO BOX 5213  
CAROL STREAM, IL 60197

HSBC BANK  
C/O FIRSEL LAW GROUP LTD  
PO TOX 1599  
LOMBARD, IL 60148-8599

HSBC CARD SERVICES  
PO BOX 71104  
CHARLOTTE, NC 28272-1104

HSBC CARD SERVICES INC.  
C/O THE BUREAUS INC.  
1717 CENTRAL ST.  
EVANSTON, IL 60201

JP MORGAN CHASE  
ATTN BANKRUPTCY  
P.O. BOX 15298  
WILMINGTON, DE 19850-5298

LAKE MONTICELLO OWNERS ASSOCIATION  
41 ASHLAWN BOULEVARD  
PALMYRA, VA 22963

LENDMARK FINANCIAL SER  
2118 USHER ST NW  
COVINGTON, GA 30014

LENDMARK FINANCIAL SERVICES  
1862 ABBEY ROAD  
CHARLOTTESVILLE, VA 22911

Stead, William and Cathy -

LENDMARK FINANCIAL SERVICES  
C/O CT CORPORATION SYSTEM, R/A  
4701 COX ROAD, SUITE 301  
GLEN ALLEN, VA 23060-6802

LOAN SHOP ONLINE  
2207 CONCORD PIKE #250  
WILMINGTON, DE 19803

LVNV FUNDING  
C/O NORTHLAND GROUP  
PO BOX 390846  
MINNEAPOLIS, MN 55439

LVNV FUNDING  
PO BOX 10584  
GREENVILLE, SC 29603-0584

LYON, JOHN DDS  
2700 HYDRAULIC ROAD  
CHARLOTTESVILLE, VA 22901

LYON, JOHN S DDS  
C/O SCOTT KRONER  
PO BOX 2737  
CHARLOTTESVILLE, VA 22902

MARTHA JEFFERSON HOSPITAL  
C/O JL WALSTON & ASSOCIATES  
326 SOUTH MAIN STREET  
EMPORIA, VA 23847

MARTHA JEFFERSON HOSPITAL  
C/O CCC  
PO BOX120568  
NEWPORT NEWS, VA 23612-0568

MARTHA JEFFERSON HOSPITAL  
P.O. BOX 2556  
CHARLOTTESVILLE, VA 22902

MARTHA JEFFERSON HOSPITAL  
P.O. BOX 759132  
BALTIMORE, MD 21275

Stead, William and Cathy -

MARTHA JEFFERSON HOSPITAL  
500 MARTHA JEFFERSON DRIVE  
CHARLOTTESVILLE, VA 22911

MARTHA JEFFERSON HOSPITAL  
C/O SENTARA COLLECTIONS  
PO BOX 79698  
BALTIMORE, MD 21279-0698

MARTHA JEFFERSON MEDICAL GROUP  
MJ MEDICAL ENTERPRISES  
P.O. BOX 1583  
CHARLOTTESVILLE, VA 22902

MARTHA JEFFERSON MEDICAL GROUP  
PO BOX 1583  
CHARLOTTESVILLE, VA 22903

MARTHA JEFFERSON ORTHOPEDICS  
C/O CHARLOTTESVILLE BUREAU  
3690 DOBLEANN DR  
CHARLOTTESVILLE, VA 22911

MARTHA JEFFERSON ORTHOPEDICS  
310 OLD IVY WAY  
SUITE 202  
CHARLOTTESVILLE, VA 22903-4896

MATHES, DONALD D MD  
C/O CHARLOTTESVILLE BUREAU  
3690 DOBLEANN DR  
CHARLOTTESVILLE, VA 22911

MATHES, DONALD D MD  
P.O. BOX 800710  
CHARLOTTESVILLE, VA 22908

MERRICK BK  
ATTN: BANKRUPTCY  
P.O. BOX 9201  
OLD BETHPAGE, NY 11804

MIDLAND FUNDING LLC  
8875 AERO DRIVE  
SUITE 200  
SAN DIEGO, CA 92123

Stead, William and Cathy -

MOBILE LOANS  
P.O. BOX 1409  
MARKSVILLE, LA 71351

MONTICELLO COMMUNITY SURGERY  
C/O NCO FINANCIAL SYSTEMS  
PO BOX 15372  
WILMINGTON, DE 19850-5372

MONTICELLO COMMUNITY SURGERY CENTER  
595 MARTHA JEFFERSON DRIVE  
SUITE 290  
CHARLOTTESVILLE, VA 22911

NET PDL  
NO KNOWN MAILING ADDRESS

NORTH CASH ADVANCE  
NORTH STAR FINANCE, LLC  
PO BOX 498  
HAYS, MT 59527

NORTHSTAR FINANCE LLC  
PO BOX 498  
HAYS, MT 59527

NTELLOS  
PO BOX 580113  
CHARLOTTE, NC 28258-0113

OCWEN LOAN SERVICING  
P.O. BOX 740616  
ATLANTA, GA 30374

OCWEN LOAN SERVICING  
PO BOX 24738  
WEST PALM BEACH, FL 33416

OCWEN LOAN SERVICING LLC  
1661 WORTHINGTON ROAD  
SUITE 100  
WEST PALM BEACH, FL 33401

Stead, William and Cathy -

ONEMAIN FI  
PO BOX 499  
HANOVER, MD 21076

ONEMAIN FINANCIAL  
BANKRUPTCY DEPT.  
PO BOX 6042  
SIOUX FALLS, SD 57117-6042

PROVIDIAN FINANCIAL / CHASE  
CHASE CARD SERVICES/ATTN: BANKRUPTCY DEP  
PO BOX 15298  
WILMINGTON, DE 19850

REGIONAL ACCEPTANCE CO  
10051 MIDLOTHIAN TPKE  
NORTH CHESTERFIELD, VA 23235

REGIONAL ACCEPTANCE CORP  
P.O. BOX 1847  
WILSON, NC 27894-1847

REGIONAL ACCEPTANCE CORP  
266 BEACON DRIVE  
WINTERVILLE, NC 28590

REGIONAL ACCEPTANCE CORP.  
P.O. BOX 20126  
GREENVILLE, NC 27858

REGIONAL ACCEPTANCE CORPORATION  
5425 ROBIN HOOD ROAD  
SUITE 101  
NORFOLK, VA 23513

SAMS CLUB / GEMB  
ATTENTION: BANKRUPTCY DEPARTMENT  
PO BOX 103104  
ROSWELL, GA 30076

SANTANDER CONSUMER USA  
PO BOX 961245  
FT WORTH, TX 76161

Stead, William and Cathy -

SANTANDER CONSUMER USA  
ATTN BANKRUPTCY DEPT.  
PO BOX 560284  
DALLAS, TX 75356-0284

SCA CREDIT SERVICES INC.  
1502 WILLIAMSON ROAD NE  
ROANOKE, VA 24012

SCHILDWACHTER, THOMAS MD.  
914 EAST JEFFERSON STREET  
SUITE 102  
CHARLOTTESVILLE, VA 22902

SCOTT WAGNER CHIROPRACTIC  
147 ZAN ROAD  
CHARLOTTESVILLE, VA 22901

SEARS  
C/O CLIENT SERVICES INC.  
3451 HARRY S TRUMAN BLVD  
SAINT CHARLES, MO 63301-4047

SEARS/CBNA  
PO BOX 6189  
SIOUX FALLS, SD 57117

SENTARA MARTHA JEFFERSON HOSPI  
C/O CREDIT CONTROL CORP  
11821 ROCK LANDING DR  
NEWPORT NEWS, VA 23606

SOVEREIGN ADVANCE  
C/O CCB CREDIT SERVICES  
5300 S 6TH STREET  
SPRINGFIELD, IL 62703-5184

SOVEREIGN ADVANCE  
P.O. BOX 10  
PARSHALL, ND 58770

SPRINGLEAF  
P.O. BOX 3121  
EVANSVILLE, IN 47731

Stead, William and Cathy -

SPRINGLEAF FINANCIAL  
ATTN: BANKRUPTCY DEPT  
PO BOX 3251  
EVANSVILLE, IN 47731

SPRINGLEAF FINANCIAL SERVICES INC.  
C/O CT CORPORATION SYSTEM  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA 23060

SST/COLUMBUS BANK&TRUS  
ATTN:BANKRUPTCY  
PO BOX 3997  
ST. JOSEPH, MO 64503

SUNTRUST  
DDA RECOVERY DEPT  
P.O. BOX 26150/VA-RIC-9394  
RICHMOND, VA 23260-6150

SUNTRUST  
RECOVERY DEPARTMENT  
P.O. BOX 85041  
RICHMOND, VA 23285-5041

SUNTRUST BANK  
C/O CBCS  
PO BOX 163729  
COLUMBUS, OH 43216-3729

SUNTRUST BANK  
C/O DANA S. BRUCE, R/A  
919 EAST MAIN ST, 13TH FLOOR  
RICHMOND, VA 23219

SWISHER DENTAL PLLC  
259 HYDRAULIC RIDGE RD #203  
CHARLOTTESVILLE, VA 22901

SWISHER DENTAL PLLC 1  
C/O CREDIT CONTROL CORP  
11821 ROCK LANDING DR  
NEWPORT NEWS, VA 23606

Stead, William and Cathy -

THE BUREAUS INC.  
C/O STEPHENS & MICHAELS ASSOCIATES  
PO BOX 109  
SALEM, NH 03079-0109

THE BUREAUS INC.  
650 DUNDEE RD  
SUITE 370  
NORTHBROOK, IL 60062

TRANSUNION  
ATTN: DISPUTE RESOLUTION DEPARTMENT  
PO BOX 2000  
CHESTER, PA 19022

WELLS FARGO BANK  
C/O INTEGRITY SOLUTION SERVICES INC  
PO BOX 7230  
OVERLAND PARK, KS 66207-0230

WELLS FARGO BANK  
BANKRUPTCY  
1 HOME CAMPUS #2303-01A  
DES MOINES, IA 50328-0001

WELLS FARGO BANK  
PO BOX 5058  
MAC: P6052-021  
PORTLAND, OR 97208-5058